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SERIAL NUMBER 10/747,940	FILING DATE 12/30/2003 RULE	CLASS 059	GROUP ART UNIT 3725	ATTORNEY DOCKET NO. SNPKX 108 DIV 1
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APPLICANTS

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** CONTINUING DATA *****

This application is a DIV of 10/032,727 12/28/2001 PAT 6,729,119 DBT

** FOREIGN APPLICATIONS ***** None DT

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 04/27/2004

Foreign Priority claimed	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance.	OH	18	16	4

Verifier and Acknowledged
 Examiner's Signature *Carrie B.* Initials *B*

ADDRESS

002555
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TITLE

Pallet for surgical stapling cartridge

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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